Connecticut State Department of Education

Career and Technical Education Teacher Questionnaire Carl D. Perkins Program Compliance Review

ا حاد الـ ا	School Name:	Cabaal Diatoiate	
nign :	ocnobi iname:	School District:	

				_
Instructions: This questionnaire is to be completed by ALL teachers (grades 9-12) that teach career and the technical education courses. Please read each statement and darken in the oval that BEST describes your opinion. Completely erase all errors and stray marks. Do not staple or hole punch this form.			8	Applicable
DEPARTMENT: OAG OBFT OCWE OFCS OME OMC OTE			Disagree	
STATEMENTS	Agree	Uncertain	٥	Š
 My classes are held at times and in locations that are convenient for most of our students. 	0	0	0	0
2. I have a designated area for teaching materials and lesson preparation.	0	0	0	0
3. Available resources appropriate for students enable me to use a variety of teaching methods.	0	0	0	0
4. I have input into the selection of appropriate teaching materials for my classes.	0	0	0	0
I am involved in the school's planning and continuous improvement of career and technical education programs under the Carl D. Perkins grant.	0	0	0	0
6. There is an established school advisory committee that works with my subject area.	0	0	0	0
7. My class size is appropriate for the subject matter taught.	0	0	0	0
 I am provided opportunities to attend professional development activities in my subject area that includes visiting business and industry related to my program area. 	0	0	0	0
9. Students feel comfortable enough to come to me to discuss any problems that occur.	0	0	0	0
10. My classroom is equipped with current technology for my subject area.	0	0	0	0
11. I would like to have more training in differentiated teaching strategies.	0	0	0	0
12. My program area has a well-defined curriculum with specified outcomes that is aligned with State and National Math, Science, Language Arts and Career and Technical Education Standards.	0	0	0	0
13. I have been provided with training opportunities to fully utilize the latest technology for my program area.	0	0	0	0
14. My classroom instruction is directly tied and frequently updated to reflect needs and trends of the working world.	0	0	0	0
15. I have a good understanding of school and community resources available to assist students.	0	0	0	0
16. School counselors have knowledge about career and technical education courses in my school.	0	0	0	0
17. School counselors have knowledge about career and technical post-secondary education opportunities for students.	0	0	0	0
18. Students are encouraged to take career and technical education courses by school counselors.	0	0	0	0
19. I am provided the opportunity to participate in a teacher externship.	0	0	0	0

Please complete questions 20 through 24 either with written comments or marking an appropriate selection.	
If I had the opportunity, I would do the following to improve the program	
Has teaching in this program been a positive experience for you? Explain.	
What type of certification do you have for the program area you are teaching?	
○ Initial ○ Provisional ○ Professional ○ Durational Shortage Area Permit (DSAP)	
What program area(s) are you certified to teach?	
Agriculture Education Cooperative Work Education Business and Finance Technology Education Family and consumer Sciences Education Marketing Education Medical Careers Education Technology Education Other (please indicate area)	
How many years have you taught in this program area? 1 year 1-2 3-4 5-10 10 or more	